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APPLICANTS

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** CONTINUING DATA ***** *No LT* *****

** FOREIGN APPLICATIONS ***** *No LT* *****

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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Signature</i> <i>LT</i> Examiner's Signature Initials	STATE OR COUNTRY KS	SHEETS DRAWING 3	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 4
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 30954
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TITLE
 Reduced fat absorption in prepared foods

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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